

SOUTH KOREA

1. Per USCINCPACINST 6200.2, Commanders are responsible for an effective Force Health Protection Plan for personnel deploying to locations within the USCP AOR, ensuring implementation of the Plan, and for appointing a FHP Officer and assistant who will serve as the Commander's focal point for the planning, coordination, and execution of "real world" force health protection planning for a specific deployment. This is applicable to all assigned and attached personnel, all Department of Defense personnel performing official duties within locations in the AOR, and all US contractor personnel employed directly by the DOD in locations in the AOR.

2. FHP Planning must include the following elements:

a. Health Threat Assessment. This assessment must evaluate known and anticipated health threat/hazards and the appropriate countermeasures to be taken for each.

b. Health Record and Readiness Screening. This task is ongoing and must be validated before deployment.

c. Health Threat Briefing. Completion of predeployment and postdeployment surveillance are not required unless otherwise stated. Attendance must be documented. Minimum contents of a Health Threat Briefing for South Korea include the following material:

(1) Immunizations.

(a) Personnel must be up to date on all routine immunizations for personnel on deployable status (tetanus booster, hepatitis A, MMR typhoid, influenza).

(b) Japanese encephalitis vaccine is only recommended for individuals who will be staying in rural-agricultural regions, especially during peak transmission period of May through late September. Distribution is countrywide.

(c) A Yellow Fever vaccination certificate is required if coming from Yellow Fever infected area.

(2) Malaria Chemoprophylaxis.

(a) *P. vivax* is endemic primarily along the western DMZ, mainly in the northern areas of Kyunggi Do Province along the Imjin River. Risk primarily is elevated June through October with a peak in August. *P. vivax* is endemic at low but increasing levels.

(b) *P. falciparum* is found in the northern areas of Kyunggi Do Province.

(c) Regimen: Chloroquine 500 mg/week starting 2 weeks before entering country and continued weekly until 4 weeks after departure. If exposed to *P. vivax*, patients who are G6PD negative and not pregnant should start primaquine 26.3mg daily for 14 days after departing South Korea, in addition to chloroquine.

d. Personal Protective Measures.

(1) Safe food and water. Community sanitation is generally good and health concerns related to foods and beverages are minimal.

(a) Use of municipal water is generally safe. In rural settings, drink only sealed bottled or canned water or beverages without ice. Additionally, in field settings, drinking water must be boiled or, alternatively, be adequately treated with iodine or chlorine, and be allowed to sit for 30 minutes.

(b) If available, consume only approved food and water. Otherwise, eat piping hot, freshly cooked food from reputable

sources. Do not eat salads or fresh fruit/vegetables. An exception is intact fruit which you wash and peel yourself, in order to avoid cross contamination between the peel and fruit.

(c) Wash hands before eating and after using the latrine.

(2) Vector Borne Diseases.

(a) Treat uniforms and bed nets with permethrin before departure. Permethrin spray lasts 5-6 washings, or 4-6 weeks, or until dry cleaned. Alternatively, uniforms treated with permethrin concentrate (compressed air sprayer technique) lasts the lifetime of the uniform.

(b) DEET cream. Apply to exposed skin and spread out into a thin layer, being careful to avoid the eyes and mouth. Apply twice a day to minimize risk of malaria, Japanese encephalitis, and dengue fever.

(c) Sleep under a permethrin-treated bed net with the edges tucked in under the bedding all around.

(3) Sexually transmitted diseases. STDs are endemic. The hepatitis B carrier rate in the general population is estimated at 6-9%. HIV transmission occurs. Abstinence is the most effective preventive measure. Latex condoms should be used if sexually active, but may not prevent transmission of all STDs, even if used correctly.

(4) Endemic infections.

(a) Typhoid is endemic at low levels. It is transmitted by ingestion of food or water contaminated by feces or urine from infective humans. Countrywide distribution and risk period is year-round.

(b) Traveler's diarrhea is endemic at low levels, primarily due to ingestion of contaminated food or water. Bacterial agents that may be a major cause of morbidity among nonindigenous personnel include *Aeromonas* spp., *Campylobacter* spp., *Escherichia coli*, *Salmonella* spp., *Shigella* spp., *Vibrio parahaemolyticus*, and *Yersinia enterocolitica*.

(c) Hepatitis A is endemic at moderate levels. It is primarily transmitted person-to-person by the fecal-oral route. Hepatitis E is primarily transmitted by fecally contaminated water.

(d) Other endemic diseases include hantaviral diseases, leptospirosis, brucellosis, and Q Fever.

(5) Environmental Factors.

(a) South Korea's continental climate is hot and humid during summer, and cold and dry during winter. Occasionally, summer tropical cyclones or late summer typhoons cause heavy showers and rapidly rising, damaging floods.

(b) Heat injury. Necessary precautions include drinking water frequently, adhering to safe work-rest cycles during extreme conditions; and careful observation of teammates to detect warning signs of heat injury such as mental status changes and cessation of sweating.

(6) Hazardous animals. Rabies occurs infrequently. Animal hazards include centipedes and black widow spiders. Tigers, leopards, bears, and wild boars may be encountered in remote areas.

(7) Motor Vehicle and General Safety.

(a) One of the greatest risks when traveling overseas is motor vehicle accidents. Seat belts and extreme caution in and around vehicles must be practiced.

(b) General safety. Exercise caution in all activities to avoid injury of any type. If you are seriously injured,

there may be no option other than medical care in a facility where sterility of equipment and safety of blood products are far below those in the US.

(8) Personal Health and Fitness. Try as much as possible to maintain a healthy regimen of hygiene and fitness. Regular bathing and frequent changes of undergarments, including socks, are important. When exercising outdoors, be aware that shorts and tank tops will make you more susceptible to disease carried by mosquitoes and other insects. Apply DEET repellent to exposed skin prior to exercising outdoors.

3. Assistance with Health Threat assessments, briefings, and countermeasures planning, as well as for the most up to date information, can be obtained from the following sources:

a. Air Force: Pacific Air Force Public Health Officer, Hickam Air Force Base, phone (DSN or 808) 449-2332, x269.

b. Army: Health Promotion and Preventive Medicine Department, Tripler Army Medical Center, phone (DSN or 808) 433-6693.

c. Navy: Epidemiology Department, Navy Environmental and Preventive Medicine Unit 6, phone (DSN or 808) 473-0555.

d. Up to date State Department advisory and Consular Information Sheet can be obtained at <http://travel.state.gov>.